

MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES FAMILY CARE SAFETY REGISTRY

EMPLOYER BACKGROUND SCREENING REQUEST

PLEASE TYPE OR PRINT CLEARLY

SECTION A: EMPLOYER INFORMATION									
BUSINESS NAME		CONTACT PERSON							
MAILING ADDRESS		CITY			STATE	ZIP CO	DE	COUNTY	
LICENSE NUMBER		LICENSING AGENCY				TELEPH	ONE NUME	BFR	
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SECTION B: EMPLOYEE IDENTIFYING	DATA					\	,		
LAST NAME	ST NAME	SECURITY N	CURITY NO. DATE OF BIRTH						
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SECTION C: DECLIEST FOR EMPLOYE	E BACKGBOU	ND SCREENING I	NEODMATIC	N					
SECTION C: REQUEST FOR EMPLOYEE BACKGROUND SCREENING INFORMATION									
The information provided is complete and accurate to the best of my knowledge. I understand it is unlawful to withhold or falsify information required on this form. I certify that my request for background information on the individuals listed in Section B is for employment purposes only. For purposes of the Family Care Safety									
Registry, "employment purposes" includes direct employer-employee relationships, prospective employer-employee relationships, and screening and interviewing of									
persons or facilities by those persons contemplating the placement of an individual in a child-care, elder care or personal care setting. I have read and understand the									
following: 1) Registry information provided consists only of information relative to the state of Missouri and does not include information from other states or information that may be available from other states; 2) any person who uses the information obtained from the Family Care Safety Registry for any purpose other than that									
specifically provided for in sections 210.900 to 210.936, RSMo, is guilty of a class B misdemeanor; and 3) when any Registry information is disclosed pursuant to									
section 210.921.1(2), RSMo, the Department of Health and Senior Services will notify the registrant of the name and address of the person making the request.								e request.	
SIGNATURE OF EMPLOYER (REQUIRED IN IN				DATE					
▶									
PRINT EMPLOYER NAME									
ATTENTION EMPLOYERS									
The Family Care Safety Registry provides basic background screening information upon initial request. Employers have the right to request specific information regarding the findings identified in the background screening. Chapter 210.921, RSMo., requires request for specific information to be submitted									
in writing. Section D serves as the written request for specific information when information is identified in the background of the individuals identified in									
Section B above.									
SECTION D: REQUEST FOR SPECIFIC INFORMATION									
I request that specific information be provided to me in the event that the background screening performed upon the individuals identified in Section B of this form									
indicates that there is information identified in any of the sources checked by the Family Care Safety Registry. I understand that this information is to be used for employment purposes only and anyone using the information for any purpose other than that specifically provided in sections 210.900 to 210.936, RSMo., is guilty of a									
class B misdemeanor.	i ine imonnation	ioi ally pulpose oul	o man mat S	becincany provid	64 III 366110113 Z	10.300 10	∠ 10.330, K	Owio., is guilty of a	
SIGNATURE OF EMPLOYER (REQUIRED IN IN	IK)				DATE				
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IMPORTANT • Backgroun	nd screening i	nformation is pro	vided at no d		00 0070 (4-11 4-				

- If you have questions on how to complete this form, contact 1-866-422-6872 (toll-free)
- Send completed form to:

Missouri Department of Health and Senior Services Fee Receipts Unit P.O. Box 570 Jefferson City, MO 65102-0570 FAX: (573) 522-6981

WHAT IS THE FAMILY CARE SAFETY REGISTRY?

The Family Care Safety Registry, administered by the Missouri Department of Health and Senior Services, provides families and other employers with a method to obtain background screening information. The Registry, through various state agencies, offers several resources to screen child-care, elder-care and personal care workers and child-care and elder-care providers:

- 1. State criminal background checks conducted by the Missouri State Highway Patrol
- 2. Child abuse/neglect records, maintained by the Division of Family Services
- 3. The Employee Disqualification List, maintained by the Division of Senior Services
- 4. The Employee Disqualification Registry maintained by the Department of Mental Health
- 5. Child-care facility licensing records, maintained by the Department of Health and Senior Services
- 6. Foster parent, residential care facility, and child placing agency licensing records, maintained by Division of Family Services
- 7. Residential living facility and nursing home licensing records, maintained by the Division of Senior Services

WHO HAS TO REGISTER?

Any person hired on or after January 1, 2001, as a child-care worker or elder-care worker, or hired on or after January 1, 2002 as a personal care worker, as defined in §210.900, subsection 2, RSMo, is required to make application for registration in the Family Care Safety Registry within fifteen (15) days of the beginning of employment. Such person who fails to submit a completed registration form to the Department of Health and Senior Services without good cause, as determined by the department, is guilty of a class B misdemeanor.

WHAT IS THE PURPOSE OF THE EMPLOYER BACKGROUND SCREENING REQUEST FORM?

Employers may use the Employer Background Screening Request form to obtain background screening information on employees who have completed registration for to the Family Care Safety Registry. The form may take the place of calling the Registry's toll-free telephone line as outlined in section 210.921, RSMo. The background screening information is provided at no cost. The registrant will be notified in writing each time a background screening request is made. The written notification will include the name and address of the employer as well as the information provided to the requestor.

HOW DO I COMPLETE THE EMPLOYER BACKGROUND SCREENING REQUEST?

<u>Section A: Employer Information</u> – List employer's identifying information.

<u>Section B: Employee Identifying Data</u> – List the full name, social security number, and date of birth, of employees whose applications for registration have been or are being submitted to the Family Care Safety Registry for processing

Section C: Request for Employee Background Screening Information – Employer must sign and date the Employer Background Screening Request in ink. The employer's signature certifies that the request for background information for employees listed in Section B is for employment purposes. The employer's signature also certifies the employer understands Registry information provided consists only of information relative to the state of Missouri and does not include information from other states; any person who uses the information obtained from the Registry for any purpose other than employment purposes is guilty of a class B misdemeanor; and when Registry information is disclosed, the Department of Health and Senior Services will notify the registrant of the name and address of the person making the request.

<u>Section D: Request for Specific Information</u> – Employers have the right to request specific information regarding the findings of identified in any of the sources checked by the Registry. The request must be submitted in writing and the employer can use this section to submit the request by adding a signature in the space provided.

HOW DO I SUBMIT THE EMPLOYER BACKGROUND SCREENING REQUEST?

The Employer Background Screening Request may be submitted by either mail or FAX. If their employee is not yet registered, the employer may choose to submit the Employer Background Screening Request along with Worker Registration form, photocopy of social security card and \$5.00 fee, by mail to the Missouri Department of Health and Senior Services, Fee Receipts Unit, P.O. Box 570, Jefferson City, MO, 65102.

WHEN WILL BACKGROUND SCREENING RESULTS BE KNOWN?

The requestor will be notified, in writing, of the results of the background screening performed by the Family Care Safety Registry. If the requestor contacts the Registry using the toll-free access line, 1-866-422, 6872, the employer will be provided the results while on the phone. The registrant will also be notified in writing each time a background screening request is made. The written notification will include the name and address of the individual making the request as well as the information provided to the requestor.

WHAT IS THE PENALTY FOR MISUSING REGISTRY INFORMATION?

Information maintained by the Family Care Safety Registry can be disclosed for employment purposes only. Employment purposes includes direct employer-employee relationships, prospective employer-employee relationships, and screening and interviewing of persons or facilities by those persons contemplating the placement of an individual in a child- or elder-care setting. Any person who uses the information obtained from the Registry for any purpose other than employment purposes is guilty of a class B misdemeanor.